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| Application Number | 10/814,293 | | |
| Filing Date | April 1, 2004 | | |
| First Named Inventor | Pawan SETH | | |
| Art Unit | | | |
| Examiner Name | Nabila G. Ibrahim | | |
| Attorney Docket Number | 54684C1 | | |

| I hereby revoke all previous powers of attorney given in the above-identified application. | | | | | | | |
|---|------------|--|----------|-----|---------------------------------------|--|--|
| A Power of Attorney is submitted h | | | | | | | |
| OR I hereby appoint the practitioners associated with the Customer Number: 219 | | | | | 1967 | | |
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| I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | | | | | | |
| SIGNATURE of Applicant of Assignee of Record | | | | | | | |
| Signature () | | [] | | | | | |
| Name ARLENE L. OFOR | 1891 | 131 | | | | | |
| Date 2014, 2006 | | Felephone | 1 - 40 - | +37 | 080F- | | |
| NOTE: Signatures of all the inventors or assignees of record of the same interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | | | |
| "Total offorms are submitted. | | <i>-</i> | | | · · · · · · · · · · · · · · · · · · · | | |

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| STATEMENT UNDER 37 CFR 3.73(b) | | | | |
|--|--|--|--|--|
| Applicant/Patent Owner: Biovail Laboratories International S.R.L. | | | | |
| Application No./Patent No.: 10/814,293 Filed/Issue Date: April 1, 2004 | | | | |
| Entitled: Multiparticulate Bisoprolol Formulation | | | | |
| | | | | |
| Biovail Laboratories International S.R.L. , a <u>a corporation</u> (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) | | | | |
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| Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08] | | | | |
| The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. Signature | | | | |
| JULY 14, 2006 | | | | |
| Signature Date ARLENC L. FONG (4) 246-437-7080 | | | | |
| Printed or Typed Name Telephone Number | | | | |
| Printed or Typed Name Telephone Number Title Title | | | | |
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